Strong women, strong futures: Improving Aboriginal Women's **Breast Cancer** Outcomes

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Acknowledgement of country

I recognise the Gadigal people of the Eora Nation as the traditional custodians of the land we are on today. I honour their Elders past, present and emerging. I honour and recognise all other Aboriginal and Torres Straight Islander people here present. I recognise our cultural authority, and our ongoing spiritual connection to country.

I recognise the Kaurna people as the traditional custodians of the land where I work to deliver health and wellbeing services.

I also honour Kaurna Elders past, present and emerging.

Nyikina woman from Derby, Western Australia. Current unaccredited General Surgery Registrar at Lyell McEwin Hospital on Kaurna country in Adelaide.















Background

Large Aboriginal population in local Hospital catchment of Northern Adelaide.

During a 6 month rotation in the Lyell McEwin Hospital in Adelaide wanted to review the literature regarding Aboriginal and Torres Strait Islander breast cancer rates.

Led to a further research discussion regarding breast cancer mortality and morbidity and why this looks so different for our Aboriginal and Torres Strait Islander women.

Current situation

1.2x increased mortality from Breast Cancer.

• Five year survival of 81% for Aboriginal and Torres Strait Islander women compared to 90% for non Aboriginal women.

Lower prevalence of breast cancer in Aboriginal women.

Larger lesions diagnosed

• >15mm lesions 51.6% Aboriginal and Torres Strait Islander women compared with 43.8 % for non Aboriginal women (Roder et al, 2012)

More invasive surgery - higher incidence of mastectomies vs lumpectomy/wide local excisions (Roder et al, 2012).

Lower breast cancer screening rates (Tapia et al, 2017)

• Less likely to attend recalls for further investigations.

Review the literature regarding breast cancer rates, mortality and morbidity amongst Aboriginal women.

 Trying to find key threads to explain higher mortality and morbidity in Aboriginal and Torres Strait Islander breast cancer diagnosis.

Analyse this literature using a strengths based approach.

Give the research team the groundwork to discuss breast cancer screening and treatment with the local Aboriginal community through local community-controlled health providers.

Eventually develop a local communication framework around breast cancer in the Aboriginal community – with a strengths-based approach.

What does the literature say

Addressing cultural and community needs may improve mortality rates (Christie et al, 2023).

- Remote communities have limited engagement with primary health care outside of Aboriginal community-controlled health services (Taylor et al, 2024).
- Most breast cancer care happening outside community controlled health services (Christie et al, 2024)

Different understanding/relevant education about breast cancer screening (Pilkington et al, 2017).

- Articles discussed it negatively through culture as a barrier others utilised strength-based methodology to view cultural care in breast cancer.
 - Education delivered by respected Aboriginal women, culturally appropriate health promotion, care and support by other women (Pilkington et al, 20017).

What does the literature say

- Minimal literature evaluating community programs on breast screening.
 - Likely these programs exist but the literature does not exist that evaluate them.
- Significant amount of the literature uses a deficit narrative – common terms: barriers, perception of difficulty engaging with the community,
- Consistent themes across all literature: Access to care, appropriate community engagement/ownership, addressing socio-economic factors, cultural care and input.
- All of this should lead to improved breast cancer screening.

What does the literature leave out?

- Nil clear best practice for breast screening education across Aboriginal communities.
- South Australian figures included in one article however nil evidence of community level data.

Next steps

Further systematic review of the literature utilising Quality Appraisal Tool (Harfield et al, 2020).

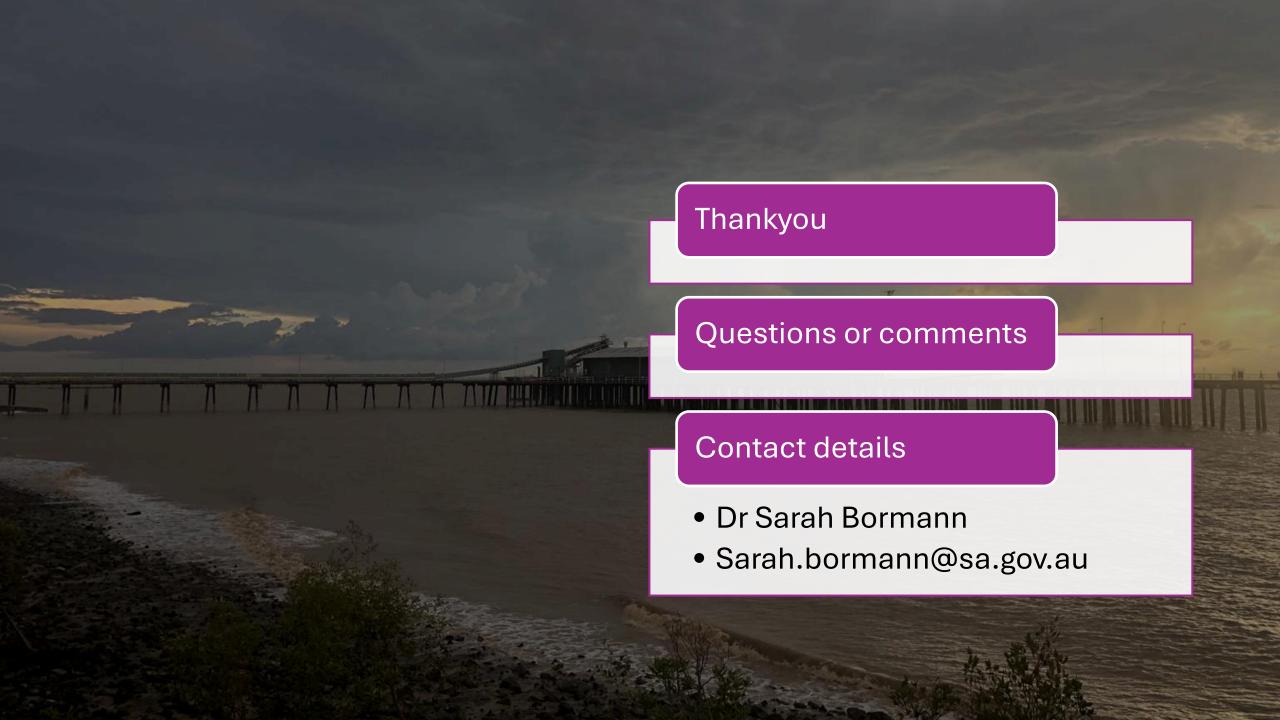
Community discussion/interviews about relevance of breast cancer screening

Engagement with breast cancer nurses about a communication tool for discussing breast cancer with the Aboriginal community.

Engagement with local and more regional Aboriginal health providers to develop a communication framework around breast cancer – building on literature and a strengths-based approach.

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